### **LG204 License Termination Plan**

#### **Termination Plan Required**

If your organization terminates its license to conduct lawful gambling, you must submit a termination plan within 30 calendar days after the date all gambling was terminated.

The termination plan must describe how you plan to dispose of your gambling equipment and spend the remaining funds

#### **Submit to Board**

The termination plan must be submitted to the Gambling Control Board for approval. Allow 2-3 months for processing due to verification of inventory, audits [if required], tax returns and payments, and other pending issues. Continue to file monthly G1 tax returns with Revenue

#### **Notification - Disposing of Funds, Filing Reports**

The Board will notify your organization in writing when the termination plan is approved. You may then dispose of any remaining funds as approved by the Board.

File the G1 Tax Return and Schedule C until your organization spends all monies from its gambling account.

	tax returns with Revenue						
0	rganization Infor	mation					
Legal name of organization			License number	Last day of gambling sales			
Business address. Do not use address of gambling			ling manager.	Business phone number			
City			State	Zip code			
Ch	nief executive officer		Dayt	time phone number			
Gambling manager			Dayt	Daytime phone number			
T	ermination Inforr	nation					
1. List the primary reason your organization is terminating lawful gambling.							
	. Date your membership approved the proposed termination plan						
4.	. Last audit submitted to Revenue covered the period from through						
5.	. Ending profit carryover from your most recent gambling tax return 5 \$						
6.	. Gambling bank account balance						
7.	Other gambling funds - total of all balances from all other gambling accounts.  Include any actual or expected refunds, credits, restitution, or other receivables 7 \$						
8.	<b>TOTAL</b> of lines 6 and 7			8 \$			
				Be sure to complete pages 2 and 3			
GC	CB Recommendation:	Approve	Questions? Call the Minnesota Gam	bling Control Board at 651-639-4000. This form will be			
St	aff initials	Deny	made available in alternative format, i.e. large print, Braille, upon request.				
Director review				<b>Data privacy notice:</b> The information requested on this form and any attachments will become publication information when received by the Board, and will be used to determine			
Dato			•	tutos and rules governing lawful gambling activities			

### **GAMES**

	Inventory Remaining			Disposition		
	Yes	No	If yes, list number of games	<b>games</b> to a	layed or unopened licensed distributor. funds received into your	
Pull-tabs				gambling ba	ank account.  py of the credit memo and	
Tipboards					inventory form LG844 to the license termination plan.	
Paddlewheel tickets						
				must be kept for 3-1/2 date reported to Revenue		

## **BINGO**

	Inventory Remaining Yes No			
			Disposition	
Bingo hard cards			If there is remaining inventory:  Will cards be returned to a licensed distributor? Yes No  Will cards be kept to conduct excluded/exempt activity? Yes No	
Bingo paper sheets, unopened case paper			<ol> <li>If yes, return unopened case paper to distributor.</li> <li>Deposit funds received into the gambling bank account.</li> <li>Attach copy of the credit memo and LG903 to the license termination plan.</li> </ol>	
Bingo paper sheets, loose			If yes, contact Revenue at 651-297-1772 to arrange for destruction of loose bingo paper.	

# PERMANENT EQUIPMENT

	Equipment Remaining		If yes, list state registration		
	Yes	No	stamp number	DISPOSITION	
Bingo number selection device				Returned to distributor Other	
Pull-tab dispensing device				Returned to distributor Other	
Paddlewheel				Returned to distributor Other	
Paddlewheel table				Returned to distributor Other	

### **Proposed Expenditures**

List the proposed expenditures to be made from the amount on page 1, line 8. Use additional sheets, if necessary.

Payee		LPE code or allowable expense explanation	Amount
·			¢
			_ \$
			\$
			_ \$
			\$
			_ \$
			\$
			_ \$
			_ \$
			_ \$
			\$
All remaining monies will be spent for			\$
Acknowledgment			
I affirm that the information in this to distribution of remaining gambling fur organization and will be implemented Board.  I acknowledge that our organization of Gambling Control Board as a condition.	nds and dispose immediately a will resolve any	al of gambling equipment has be fter receiving written approval fr pending compliance issues to the	en approved by our rom the Gambling Cont
Chief executive officer signature	 Date	Gambling manager signature	. Date
Attach the following:		Mail to:	ard

- 1. List of all remaining inventory
- 2. Copy of three most recent gambling bank statements and documentation for all other bank accounts or other business where other gambling accounts or funds are held. Include bank name(s) and account numbers
- 3. Copy of most recent Schedule F
- Copy of credit memos from distributors for any returned gambling equipment

Gambling Control Board Suite 300 South 1711 W County Road B Roseville, MN 55113